

<i>SERFF Tracking Number:</i>	<i>ASPX-125625554</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Bankers Insurance Company of Florida</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>CM AR02916AIF01</i>		
<i>TOI:</i>	<i>09.0 Inland Marine</i>	<i>Sub-TOI:</i>	<i>09.0005 Other Commercial Inland Marine</i>
<i>Product Name:</i>	<i>Corporate Compliance Filing</i>		
<i>Project Name/Number:</i>	<i>Corporate Compliance Filing/CM AR02916AIF01</i>		

Filing at a Glance

Company: American Bankers Insurance Company of Florida

Product Name: Corporate Compliance Filing	SERFF Tr Num: ASPX-125625554	State: Arkansas
TOI: 09.0 Inland Marine	SERFF Status: Closed	State Tr Num: EFT \$50
Sub-TOI: 09.0005 Other Commercial Inland Marine	Co Tr Num: CM AR02916AIF01	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Author: SPI AssurantPC	Disposition Date: 07/18/2008
	Date Submitted: 04/28/2008	Disposition Status: Approved
Effective Date Requested (New):		Effective Date (New): 06/01/2008
Effective Date Requested (Renewal): 06/01/2008		Effective Date (Renewal):
State Filing Description:		

General Information

Project Name: Corporate Compliance Filing	Status of Filing in Domicile:
Project Number: CM AR02916AIF01	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 07/18/2008	
State Status Changed: 05/01/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
RE: Form filing for Terrorism Risk Insurance Program Reauthorization Act of 2007	
American Bankers Insurance Company of Florida	
NAIC# 0019-10111/FEIN# 59-0593886	
Commercial Computer 2000	
Line of Business: Commercial Inland Marine	
Company Filing Number CCFCMAR02916AIF01	

<i>SERFF Tracking Number:</i>	<i>ASPX-125625554</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Bankers Insurance Company of Florida</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
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<i>Product Name:</i>	<i>Corporate Compliance Filing</i>		
<i>Project Name/Number:</i>	<i>Corporate Compliance Filing/CM AR02916AIF01</i>		

Forms:

Endorsement AJ9700EPC-0108

Notice N8051-0108 (replaces N8051-0306)

In accordance with the Terrorism Risk Insurance Program Reauthorization Act of 2007 Bulletin, we are filing the above referenced forms. The Endorsement is amending the policy by adding the certified acts of terrorism coverage in accordance with the changes mandated by the Bulletin. We have also amended our Terrorism Notice to reflect the changes as mandated by the Bulletin.

We are not filing any rates. The premium that is attributable for acts of terrorism have been waived. Future premium charges for terrorism coverage, if any, will be made at the time of policy renewal and will be filed if necessary.

Company and Contact

Filing Contact Information

Marla Harrington, Contract Compliance Analyst Marla.Harrington@Assurant.com
 11222 Quail Roost Drive (305) 253-2244 [Phone]
 Miami, FL 33157 (305) 252-6987[FAX]

Filing Company Information

American Bankers Insurance Company of Florida	CoCode: 10111	State of Domicile: Florida
11222 Quail Roost Dr	Group Code: 19	Company Type:
Miami, FL 33157	Group Name: Assurant, Inc. Group	State ID Number:
(305) 253-2244 ext. [Phone]	FEIN Number: 59-0593886	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No

<i>SERFF Tracking Number:</i>	<i>ASPX-125625554</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Bankers Insurance Company of Florida</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>CM AR02916AIF01</i>		
<i>TOI:</i>	<i>09.0 Inland Marine</i>	<i>Sub-TOI:</i>	<i>09.0005 Other Commercial Inland Marine</i>
<i>Product Name:</i>	<i>Corporate Compliance Filing</i>		
<i>Project Name/Number:</i>	<i>Corporate Compliance Filing/CM AR02916AIF01</i>		
Fee Explanation:			
Per Company:	No		

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Bankers Insurance Company of Florida	\$50.00	04/28/2008	19934097

SERFF Tracking Number: ASPX-125625554 State: Arkansas

Filing Company: American Bankers Insurance Company of Florida State Tracking Number: EFT \$50

Company Tracking Number: CM AR02916AIF01

TOI: 09.0 Inland Marine Sub-TOI: 09.0005 Other Commercial Inland Marine

Product Name: Corporate Compliance Filing

Project Name/Number: Corporate Compliance Filing/CM AR02916AIF01

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	07/18/2008	07/18/2008
Approved	Llyweyia Rawlins	05/01/2008	05/01/2008

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Reopen Filing	Note To Filer	Llyweyia Rawlins	07/18/2008	07/18/2008
TRIA Act of 2007 filing	Note To Reviewer	SPI AssurantPC	07/18/2008	07/18/2008
Filing Status	Note To Filer	Llyweyia Rawlins	07/16/2008	07/16/2008
TRIA Act of 2007 filing.	Note To Reviewer	SPI AssurantPC	07/15/2008	07/15/2008
Filing Status	Note To Filer	Llyweyia Rawlins	07/15/2008	07/15/2008
TRIA Act of 2007 filing	Note To Reviewer	SPI AssurantPC	07/15/2008	07/15/2008

<i>SERFF Tracking Number:</i>	<i>ASPX-125625554</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Bankers Insurance Company of Florida</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
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<i>TOI:</i>	<i>09.0 Inland Marine</i>	<i>Sub-TOI:</i>	<i>09.0005 Other Commercial Inland Marine</i>
<i>Product Name:</i>	<i>Corporate Compliance Filing</i>		
<i>Project Name/Number:</i>	<i>Corporate Compliance Filing/CM AR02916AIF01</i>		

Disposition

Disposition Date: 07/18/2008

Effective Date (New): 06/01/2008

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: ASPX-125625554 State: Arkansas

Filing Company: American Bankers Insurance Company of Florida State Tracking Number: EFT \$50

Company Tracking Number: CM AR02916AIF01

TOI: 09.0 Inland Marine Sub-TOI: 09.0005 Other Commercial Inland Marine

Product Name: Corporate Compliance Filing

Project Name/Number: Corporate Compliance Filing/CM AR02916AIF01

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Form	COMMERCIAL COMPUTER 2000 TERRORISM ENDORSEMENT	Approved	Yes
Form	COMMERCIAL COMPUTER 2000 TERRORISM NOTICE	Approved	Yes

<i>SERFF Tracking Number:</i>	<i>ASPX-125625554</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Bankers Insurance Company of Florida</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
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<i>Product Name:</i>	<i>Corporate Compliance Filing</i>		
<i>Project Name/Number:</i>	<i>Corporate Compliance Filing/CM AR02916AIF01</i>		

Disposition

Disposition Date: 05/01/2008

Effective Date (New): 06/01/2008

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: ASPX-125625554 State: Arkansas

Filing Company: American Bankers Insurance Company of Florida State Tracking Number: EFT \$50

Company Tracking Number: CM AR02916AIF01

TOI: 09.0 Inland Marine Sub-TOI: 09.0005 Other Commercial Inland Marine

Product Name: Corporate Compliance Filing

Project Name/Number: Corporate Compliance Filing/CM AR02916AIF01

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Form	COMMERCIAL COMPUTER 2000 TERRORISM ENDORSEMENT	Approved	Yes
Form	COMMERCIAL COMPUTER 2000 TERRORISM NOTICE	Approved	Yes

SERFF Tracking Number:	ASPX-125625554	State:	Arkansas
Filing Company:	American Bankers Insurance Company of Florida	State Tracking Number:	EFT \$50
Company Tracking Number:	CM AR02916AIF01		
TOI:	09.0 Inland Marine	Sub-TOI:	09.0005 Other Commercial Inland Marine
Product Name:	Corporate Compliance Filing		
Project Name/Number:	Corporate Compliance Filing/CM AR02916AIF01		

Note To Filer

Created By:

Llyweyia Rawlins on 07/18/2008 02:40 PM

Subject:

Reopen Filing

Comments:

I have reopened this filing and closed-approved. Please let me know if you received this.

Thanks

Llyweyia

Note To Reviewer

SPI AssurantPC on 07/18/2008 02:18 PM

TRIA Act of 2007 filing

Ms. Rawlins,

Created by SERFF on 07/18/2008 03:50 PM

SERFF Tracking Number:	ASPX-125625554	State:	Arkansas
Filing Company:	American Bankers Insurance Company of Florida	State Tracking Number:	EFT \$50
Company Tracking Number:	CM AR02916AIF01		
TOI:	09.0 Inland Marine	Sub-TOI:	09.0005 Other Commercial Inland Marine
Product Name:	Corporate Compliance Filing		
Project Name/Number:	Corporate Compliance Filing/CM AR02916AIF01		

Note To Filer

Created By:

Llyweyia Rawlins on 07/16/2008 01:17 PM

Subject:

Filing Status

Comments:

You can go under search tab and key in your serff number to bring up this filing showing Closed-approved and save as a PDF file for your records.

If this doesn't work, let me know.

Sincerely,

Llyweyia Rawlins

SERFF Tracking Number:	ASPX-125625554	State:	Arkansas
Filing Company:	American Bankers Insurance Company of Florida	State Tracking Number:	EFT \$50
Company Tracking Number:	CM AR02916AIF01		
TOI:	09.0 Inland Marine	Sub-TOI:	09.0005 Other Commercial Inland Marine
Product Name:	Corporate Compliance Filing		
Project Name/Number:	Corporate Compliance Filing/CM AR02916AIF01		

Note To Reviewer

Created By:

SPI AssurantPC on 07/15/2008 04:01 PM

Subject:

TRIA Act of 2007 filing.

Comments:

Thank you for your response. I don't have anything on this end that shows it was approved through SERFF. Could you possibly resend?

SERFF Tracking Number:	ASPX-125625554	State:	Arkansas
Filing Company:	American Bankers Insurance Company of Florida	State Tracking Number:	EFT \$50
Company Tracking Number:	CM AR02916AIF01		
TOI:	09.0 Inland Marine	Sub-TOI:	09.0005 Other Commercial Inland Marine
Product Name:	Corporate Compliance Filing		
Project Name/Number:	Corporate Compliance Filing/CM AR02916AIF01		

Note To Filer

Created By:

Llyweyia Rawlins on 07/15/2008 03:37 PM

Subject:

Filing Status

Comments:

This filing was Closed-Approved on 05/01/2008.

Sincerely,
Llyweyia Rawlins

SERFF Tracking Number:	ASPX-125625554	State:	Arkansas
Filing Company:	American Bankers Insurance Company of Florida	State Tracking Number:	EFT \$50
Company Tracking Number:	CM AR02916AIF01		
TOI:	09.0 Inland Marine	Sub-TOI:	09.0005 Other Commercial Inland Marine
Product Name:	Corporate Compliance Filing		
Project Name/Number:	Corporate Compliance Filing/CM AR02916AIF01		

Note To Reviewer

Created By:

SPI AssurantPC on 07/15/2008 02:48 PM

Subject:

TRIA Act of 2007 filing

Comments:

Could you please provide a status of this filing at your earliest convenience.

Thank you!

SERFF Tracking Number: ASPX-125625554 State: Arkansas

Filing Company: American Bankers Insurance Company of Florida State Tracking Number: EFT \$50

Company Tracking Number: CM AR02916AIF01

TOI: 09.0 Inland Marine Sub-TOI: 09.0005 Other Commercial Inland Marine

Product Name: Corporate Compliance Filing

Project Name/Number: Corporate Compliance Filing/CM AR02916AIF01

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	COMMERCIAL COMPUTER 2000 TERRORISM ENDORSEMENT	AJ9700EP0108 C-		Endorseme New nt/Amendm ent/Condi ons		0.00	AJ9700EPC- .PDF
Approved	COMMERCIAL COMPUTER 2000 TERRORISM NOTICE	N8051- 0108		Disclosure/ Replaced Notice	Replaced Form #:0.00 N8051- Previous Filing #:		N8051-.PDF

American Bankers Insurance Company of Florida

[A Stock Insurance Company]

[11222 Quail Roost Drive, Miami, FL 33157-6596•305. 253.2244]

COMMERCIAL COMPUTER 2000 CERTIFIED ACTS OF TERRORISM COVERAGE AND CAP ON CERTIFIED ACTS LOSSES

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

Your Policy covers certified acts of terrorism.

Certified Act of Terrorism means an act that is certified by the Secretary of the Treasury, in accordance with the Secretary of State and the Attorney General of the United States, to be an act of terrorism pursuant to the federal Terrorism Risk Insurance Act.

The criteria contained in the Terrorism Risk Insurance Act for a certified act of terrorism include the following:

1. The act resulted in insured losses in excess of \$5 million in the aggregate, attributable to all types of insurance subject to the Terrorism Risk Insurance Act; and
2. The act is a violent act or an act that is:
 - (a) Dangerous to human life, property or infrastructure; and
 - (b) Is committed by an individual or individuals as part of an effort to:
 - i. Coerce the civilian population of the United States; or
 - ii. To influence the policy or affect the conduct of the United States Government by coercion.

The United States Government, Department of Treasury, will pay a share of terrorism losses insured under the federal program. Under the formula the United States Government generally reimburses 85% of covered terrorism losses exceeding the statutorily established deductible paid by us. However, if aggregate insured losses attributable to certified acts of terrorism exceed \$100 billion in a Program Year (January 1 through December 31), the Treasury will not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a Program Year and we have met our insurer deductible under the Terrorism Risk Insurance Act:

1. We shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion; and
2. Insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

This endorsement does not create coverage for any loss that would be otherwise excluded under the War or Nuclear exclusion in your Policy.

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME.

DISCLOSURE NOTICE – APPLICANT OR POLICYHOLDER PURSUANT TO TERRORISM RISK INSURANCE ACT

Coverage for acts of terrorism is already included in your current policy or new/renewal premium quotation.

The premium that is attributable to coverage for acts of terrorism has been waived for the current policy term. Future premium charges for terrorism coverage, if any, will be made at the time of your next policy renewal.

You are hereby notified that under the Terrorism Risk Insurance Act, as amended in 2007, the definition of act of terrorism has changed. As defined in Section 102(1) of the Act: The term “act of terrorism” means any act that is certified by the Secretary of the Treasury – in concurrence with the Secretary of State, and the Attorney General of the United States – to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

Under your coverage any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula the United States Government generally reimburses 85% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage.

The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers’ liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

If you should have any questions regarding this notice, please contact your independent insurance agent or insurance company.

[Insurer]

[Policy Number]

<i>SERFF Tracking Number:</i>	<i>ASPX-125625554</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Bankers Insurance Company of Florida</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>CM AR02916AIF01</i>		
<i>TOI:</i>	<i>09.0 Inland Marine</i>	<i>Sub-TOI:</i>	<i>09.0005 Other Commercial Inland Marine</i>
<i>Product Name:</i>	<i>Corporate Compliance Filing</i>		
<i>Project Name/Number:</i>	<i>Corporate Compliance Filing/CM AR02916AIF01</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number:	ASPX-125625554	State:	Arkansas
Filing Company:	American Bankers Insurance Company of Florida	State Tracking Number:	EFT \$50
Company Tracking Number:	CM AR02916AIF01		
TOI:	09.0 Inland Marine	Sub-TOI:	09.0005 Other Commercial Inland Marine
Product Name:	Corporate Compliance Filing		
Project Name/Number:	Corporate Compliance Filing/CM AR02916AIF01		

Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Review Status:	Approved	05/01/2008
Comments:				
Attachments:				
AR - NAIC FORM FILING SCHEDULE.PDF				
AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF				

FORM FILING SCHEDULE

(This form must be provided **ONLY** when making a filing that includes forms)
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	CCFCMAR02916AIF01
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2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	
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3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or Withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	COMMERCIAL COMPUTER 2000 TERRORISM ENDORSEMENT	AJ9700EPC-0108	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02	COMMERCIAL COMPUTER 2000 TERRORISM NOTICE	N8051-0108	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	N8051-0306	
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
11			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		


Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
g. SERFF Filing #:		
h. Subject Codes		

3. Group Name	Assurant, Inc. Group				Group NAIC #	0019
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #		
American Bankers Insurance Company of Florida	FL	10111	59-0593886			

5. Company Tracking Number	CCFCMAR02916AIF01
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Marla Harrington 11222 Quail Roost Drive Miami FL 33157	Contract Compliance Analyst	800-852-2244 Ext. 33194	305-252-6987	Marla.Harrington@Assurant.com
7. Signature of authorized filer				
8. Please print name of authorized filer	Marla Harrington			

Filing Information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	09.0 Inland Marine	
10. Sub-Type of Insurance (Sub-TOI)	09.0005 Other Commercial Inland Marine	
11. State Specific Product code(s) (if applicable) [See State Specific Requirements]		
12. Company Program Title (Marketing Title)		
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)	
14. Effective Date(s) Requested	New: June 1, 2008	Renewal:
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
16. Reference Organization (if applicable)		
17. Reference Organization # & Title		
18. Company's Date of Filing		
19. Status of filing in domicile	<input checked="" type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved	

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking #	CCFCMAR02916AIF01
21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]	

RE: Form filing for Terrorism Risk Insurance Program Reauthorization Act of 2007
 American Bankers Insurance Company of Florida
 NAIC# 0019-10111/FEIN# 59-0593886
 Commercial Computer 2000
 Line of Business: Commercial Inland Marine
 Company Filing Number CCFCMAR02916AIF01

Forms:
 Endorsement AJ9700EPC-0108
 Notice N8051-0108 (replaces N8051-0306)

In accordance with the Terrorism Risk Insurance Program Reauthorization Act of 2007 Bulletin, we are filing the above referenced forms. The Endorsement is amending the policy by adding the certified acts of terrorism coverage in accordance with the changes mandated by the Bulletin. We have also amended our Terrorism Notice to reflect the changes as mandated by the Bulletin.

We are not filing any rates. The premium that is attributable for acts of terrorism have been waived. Future premium charges for terrorism coverage, if any, will be made at the time of policy renewal and will be filed if necessary.

22.	Filing Fees (Filer must provide check # and fee amount if applicable.) [If a state requires you to show how you calculated your filing fees, place that calculation below]
<p>Check #: N/A – submitted electronically Amount: \$50.00</p> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>	

***Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)